

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF <u>Juan Carlos Gomez vs</u>		COURT CASE NUMBER <u>03-30283-KPN</u>
DEFENDANT <u>US Immigration and Naturalization Service</u>		TYPE OF PROCESS <u>S/C</u>
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Aaron L. Goodwin, Assistant, U.S. Attorney, US</u>	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>Attorney's Office, 1550 Main Street Rm. 310, Springfield MA 01104</u>	
AT	SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: <u>Juan Carlos Gomez</u> <u>#191567</u> <u>Osborn Correctional Institution</u> <u>P.O. Box 100, Somers CT 06071</u>	
	Number of process to be served with this Form - 285	<u>2</u>
	Number of parties to be served in this case	<u>3</u>
	Check for service on U.S.A.	<input checked="" type="checkbox"/>
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):		

Signature of Attorney or other Originator requesting service on behalf of:

Mary Lynn Clark☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

12/9/03**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk <u>Daniel W. Kelly</u>	Date <u>12/9/03</u>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.Date of Service  
12/9/03

Time  
11:00 am

Signature of U.S. Marshal or Deputy  
Daniel W. Kelly

Service Fee <u>\$45.00</u>	Total Mileage Charges (including endeavors) <u>—</u>	Forwarding Fee <u>—</u>	Total Charges <u>\$45.00</u>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: